2268 HIV INFECTION AND AIDS

Chapter: **Sununu Youth Services Center** Section: **Healthcare**



New Hampshire Division for Children, Youth and Families Policy Manual

Policy Directive: Approved:

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Scheduled Review Date: **01-01-11** William W. Fenniman, DJJS Director

Related Form(s): **Informed Consent Form**

Related Statute(s): RSA 141:F

Related Admin Rule(s):

Bridges' Screen(s) and Attachment(s):

Related Federal Regulation(s):

Residents admitted to the SYSC frequently engage in behaviors that are high risk for HIV infection. Controversy in HIV-antibody testing of minors can be further compounded by the incarceration or out-of-home placement of a juvenile. Although such testing is <u>not</u> mandatory, nor recommended without forethought, it is the policy of DJJS to remain open to such testing for residents when it is in their best interest. SYSC will provide the best resources available to its residents regarding HIV/AIDS education, prevention information, effective infection control, testing, and medical treatment. These needs will be met in a positive, enlightened atmosphere that encourages knowledge, respects confidentiality, and discourages fear and prejudice among residents and staff.

Purpose

The purpose of this policy is to establish SYSC HIV Infection and AIDs procedure.

Procedure

I. Non-Discrimination

- A. Discrimination against residents or employees with HIV infection or related illness shall not be tolerated. The following shall apply:
 - No resident who voluntarily discloses that he/she has HIV infection or related illness shall be removed from any program solely on that basis. Residents who voluntarily disclose such information will be counseled in the importance of avoiding transmission of HIV to others and seeking treatment.
 - 2. No individual shall be denied admission to any program solely on the basis of HIV infection, related illness, or perception of infection.
 - 3. <u>Policy 2289 (Infection Control Program)</u> will prevail for the care and treatment of the HIV infected individual with regards to activities of daily living. Residents who have HIV infections or AIDS shall be assigned to single rooms.
 - 4. The medical, pharmaceutical, and dietary requirements of all residents shall be attended to within the limits and capabilities of SYSC. Residents who are HIV positive and require special attention in this regard shall receive appropriate and reasonable care including referral to other agencies and services where appropriate and necessary.

II. Confidentiality

- A. The following confidentiality procedure shall apply in all cases of HIV and AIDS in the SYSC:
 - 1. In accordance with RSA 141:F:7, the HIV status of committed residents will be made known to the Manager of Health Services, the SYSC physician, and the Director, who may disclose this information only to those individuals who require such information to properly assign, treat, or manage the infected individual.
 - 2. As a rule, district court judges will be notified of a resident's HIV status upon request via a court order. Child Protection Social Workers and JPPOs will <u>not</u> be notified unless the Manager of Health Services and/or the SYSC physician deem it necessary for appropriate health care.
 - 3. In accordance with RSA 141-F:7, the physician or nurse designated by the physician may disclose test results to a parent or legal quardian of residents under age 18.
 - 4. Children over the age of 14 may receive HIV antibody testing and results without the consent and knowledge of parent/legal guardian, should they choose to do so.
 - 5. In accordance with RSA 141-F:8, the Manager of Health Services/ SYSC physician may disclose information pertaining to the identity and test results of a resident tested for HIV to other physicians and health care providers directly involved in the health care of a person when the disclosure of such information is necessary in order to protect the health of the person tested.
 - 6. Pursuant to RSA 141-F:10, any person who purposefully violates RSA 141-F:2 I or RSA 141-F:8 I and discloses the identity of an HIV infected person shall be liable to such person for actual damages, court costs, attorney's fees; in addition, if an employee discloses HIV status to any other employee, the same standards of confidentiality found in RSA 141-F:8 and RSA 141-F:10 shall be observed.

III. HIV Antibody Testing

- A. The following HIV Antibody testing procedures shall apply:
 - 1. The Teen Health Center shall provide HIV antibody testing, unless ordered by the SYSC physician.
 - 2. All residents shall be offered appointments with nurses from the Teen Health Center.
 - (a) The Teen Health Center shall handle all aspects and documentation of testing and counseling. The nursing staff at SYSC shall schedule those residents wishing to be tested.
 - (b) Residents over the age of 14 do not need parental approval for testing. Parent/legal guardian of residents under the age of 14 will be contacted by the Medical Department at SYSC for a phone authorization and then will be mailed the Informed Consent Form for HIV Antibody Testing to sign and return.

DCYF Policy 2268 Page 2 of 4

- 3. The Teen Health Center will notify the Manager of Health Services of any positive results.
- 4. The SYSC Medical staff shall bear in mind the need to assess residents for suicidal or self-abusive potential at any point in this process and should initiate the proper precautions whenever necessary. There should be no mention of HIV testing on the suicide assessment or in chart documentation.
- 5. Refer to the Confidentiality section of this policy (Section B) regarding the filing of documentation and the notification of parent/legal guardian and other health care providers.
- 6. The record of a resident who has received HIV antibody testing shall include the results of such testing. Employees of SYSC with access to the medical records are required to maintain confidentiality. Any person who discloses the identity of a person infected with HIV may face civil liability as described in RSA 141-F:10.
- 7. HIV antibody test results shall not be disclosed by mail, email, fax, or telephone to discharged residents. If the resident is discharged before test results become available, the resident may sign the "Authorization of Release of Information" in the section specific to HIV-related testing, treatments, and/or counseling. The resident may designate a physician or other individual in the community to receive test results and prove post-test counseling.

IV. HIV-Infected Residents

- A. The following procedures shall apply to all HIV-Infected residents:
 - 1. Upon receiving confirmed information that a resident is sero-positive for HIV, the Medical/nursing staff shall be primarily responsible for ensuring optimum health care, health rights, and emotional support for said resident.
 - 2. In addition to the SYSC physician, the nurse shall ensure if a primary care physician is needed, one will be provided and maintained for health promotion.
 - 3. Nurses shall do the following:
 - (a) Maintain contact with the parent/legal guardian if they are aware of HIV status
 - (b) Obtain a record of current immunizations to update per physician recommendation.
 - (c) Provide adequate rest, nutrition, and exercise for adequate health.
 - (d) Monitor for adequate hygiene.
 - (e) Monitor stress level and provide stress reduction as is possible.
 - (f) Monitor for any symptoms or complaints of illness and refer to physician as needed.

DCYF Policy 2268 Page 3 of 4

- (g) Maintain laboratory evaluations as ordered by the physician.
- (h) Maintain infection control standards so that HIV-infected residents are not subjected to contagious illnesses of other residents or staff.
- (i) Provide emotional support as needed.
- Monitor for any symptoms of decreased cognitive functioning and refer to (j) physician as needed.

V. **AIDS-Diagnosed Residents**

- A. The following procedure shall apply to all AIDS diagnosed residents:
 - 1. All procedures outlined in the care of HIV-infected residents pertain to AIDSdiagnosed residents.
 - 2. The nurse shall request protocols for AIDS-related illnesses, preferably from the physician.
 - 3. Illness may be more noticeable to staff and other residents especially if hospitalizations are required. Maintaining a supportive, confidential environment for the resident is essential while at the same time allaying fears and concerns of staff and residents by reinforcing both universal precautions and HIV education.

VI. **HIV/AIDS Education**

- Α. Education that is current and easily assimilated is essential to creating an environment capable of dealing with both the potentials and actualities of HIV and AIDS.
- В. All new employees will participate in a standard HIV education in-service upon hire as part of the Blood Borne Pathogen training.
- C. All employees will attend HIV update in-service annually as part of the Blood Borne Pathogen Training.
- D. Selected employees will be encouraged to attend seminars, workshops, and in-services on HIV/AIDS provided by outside agencies. Such employees will be expected to share their new knowledge with their fellow employees in either an in-service or informal format, thus providing an evolving base of knowledge for department employees.
- E. Residents will receive HIV/AIDS education via health education classes provided in all programs through a variety of curriculum and materials.

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	Health Authority Signature	Date

DCYF Policy 2268 Page 4 of 4